RI SOS Filing Number: 201874677480 Date: 8/15/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2018 **Limited Liability Company**

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

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|--|---|------|---------------------|-----------|-----------|
| 1. Entity ID Number | 2. Exact name of the Limited Liability Company | | | | |
| 324176 | A. A. PLAZA, LLC | | | | |
| 3. NAICS Code | 4. Brief description of the character of business conducted in Rhode Island Commercial Rental Proporty | | | | |
| 531110 | | | | | |
| 5. State of Formation | | | | | |
| RII | | | | 0 | |
| 6. Principal Office Address | | | City | State | Zip 02919 |
| 50 King Street | | | Johnson | الإسليم | 02414 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | |
| Contact Name Angelo Aiello | | | Contact Title OWNER | | |
| Street Address 50 King STreet | | | city Johnston | State II. | Zip 02919 |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS | | | | | |
| Manager Name | | | Manager Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Manager Name | | | Manager Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Check the box to indicate an attachment | | | | | |
| 9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642. | | | | | |
| Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. | | | | | |
| Name of Authorized Person Augelo Aiello Signature of Authorized Person Augelo Aiello Date 8/13/18 | | | | | |
| Signature of Authorized Person | | | | | |
| angle aiello | | | | | |
| | | | | | |

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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